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Art Unit: 3732

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CLIENT NO.: 2026-00900

TCTAL NUMBER OF PAGES (INCLUDING THIS ONE) 13

COMMENTS: Re:

U.S. Patent Serial No. 10/023,911

Applicant: Kit Yeng Lim et al.

The following documents are attached for filing:

Fee Transmittal (1 p.); Petition for Extension of Time (1 p.); Response to Final Office Action dated February 24, 2004

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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FEE TRANSMITTAL For FY 2004		Complete if Known					
		Application Number			10/023,911		
		Filing Date			December 18, 2001		
Effective 10/01/2003. Patent fees are subject to annual revision		First Named Inventor			Kit Yeng Lim		
		Examiner Name			Anuradha Ramana		
Applicant claims small entity status. See 37 CFR 1.27		Art Unit			3732		
TOTAL AMOUNT OF PAYMENT S 420.00		Attorney Docket No.			2026-00900		
METHOD OF PAYMENT (Check all that apply)		FEE CALCULATION (continued)					
Check	SUE NO.GO	3. ADDITIO Large Entity Fec Fec Code (8) 1051 130 1052 50 1053 130 1812 2,520 18042 920* 1805 1,840* 1251 110 1252 420 1253 950 1254 1,480 1255 2,010 1401 330 1402 330 1403 280 1451 1,510 1452 110 1453 1,330 1501 1,330 1502 480 1450 130 1807 50 123 50 1806 180 8021 40 1809 770 1810 770 1801 770 1801 770 1801 770 1802 900 Other fee (specify)	Small E Fec Code 2051 2052 1053 1812 1804 1805 2251 2252 2453 2254 2255 2401 2502 2501 2502 2501 1806 123 2809 2810 2801 1802	55 210 2740 1,840* 55 210 1,005 165 1440 1,510 50 50 50 50 50 50 50 50 50 50 50 50 50	Foe Description Surcharge - late filing Surcharge - late filing Surcharge - late provis fee or cover sheet Non-English specificat For filing a request for recommination Requesting publication to Examiner action Requesting publication Extension for reply wi Extension for rex	tional filing tion ex parts a of SIR prior to of SIR after thin first month thin second month thin first month thin fourth month thin fifth month thin fifth month thin fifth month thin of an appeal g ublic use voidable themtional same) sistioner 7 CFR 1.17(g) visional applications tion Disclosure Strm assignment per r of properties) er final rejection ention to be 1.29(b)) Examination (RCE) examination	Fee Paid \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
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SUBTOTAL (2) S ** or number previously paid, if greater; Far Reissues, see above							
SUIDMITTED BY				Complete (if applicable)			
Name (Print/Type) Marcella D Matkins	Mar.		Registration No. (Attorney Leant) 36,		62 Telephone	(713) 238-8000)
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